That was this "Contract on America." That was Newt Gingrich's philosophy. I think we see it further taking place here today.

The Senator from Minnesota, I think, is basically going down that same path that Governor Bush is. Basically, what they have envisioned is a prescription drug program where, basically, if you are poor, you are on welfare, and you get it. If you are rich, you don't need it, and you pay for your own or you can belong to your own insurance plan and pay for it, or maybe you have an employer-sponsored program. But if you are the middle class, and you are in that middle group, you are paying the bill for both of them. You are paying for the tax breaks for the wealthy, and you are paying for the welfare benefits for the poor so they can get their prescription drugs. But you, in the middle class, don't get anything. If you do, in fact, get in this program, you will be paying and paying and paying and paying.

The Republicans have never liked Medicare. They did not like it when it came in, and they have never liked it since. So they just keep coming up with these kinds of programs that sound nice, but basically it is designed to unravel Medicare and let it wither on the vine.

Mr. President, I want to take to the floor today again to speak about the lack of due process in the Senate regarding judgeships, and especially the nomination of Bonnie Campbell for a position on the Eighth Circuit Court of Appeals.

Her nomination has now been pending for 216 days. Yesterday, the Senate voted through four judges. Three of them were nominated and acted on in July; one was nominated in May. Bonnie Campbell was nominated in March. Yet those got through, but they are holding up Bonnie Campbell. Why?

Maybe it is because she has been the Director of the Violence Against Women Office in the Justice Department for the last 5 years; that office which has implemented the Violence Against Women Act, which, by all accounts, has done an outstanding job.

Maybe my colleagues on the other side of the aisle do not want any woman that is qualified to be an appeals court judge. Maybe that is why they are holding it up. Maybe it is because she has done such a good job of implementing the Violence Against Women Act.

Maybe they are holding her up because they think there are enough women on the circuit court. Of 148 circuit judges, only 33 are women; 22 percent. But maybe my colleagues on the Republican side think that is enough women to have on the circuit court.

I have said time and time again—and I will say it every day that we are in session—that Bonnie Campbell is not being treated fairly, not being ac-

corded, I think, the courtesy the Senate ought to afford someone who is well qualified.

All the paperwork is done. All the background checks are done. She is supported by Senator Grassley, a Republican, and by me, a Democrat from her home State. That may rarely happen around here. So Bonnie Campbell is not being treated fairly.

Senator HATCH, the other day, said, well, the President made some recess appointments in August, and that didn't set too well with some Senators. But what has that got to do with Bonnie Campbell? Maybe they don't like the way President Clinton combs his hair, but that has nothing to do with Bonnie Campbell being a judge on the circuit court.

Is Senator Hatch really making the argument that because President Clinton made some recess appointments that he didn't like, so that gives him an adequate excuse and reason to hold up Bonnie Campbell? I find that an interesting argument and an interesting position to take.

I have heard that there was a news report that came out today that some of the Senators on the other side had some problems with her views. Now, this is sort of general. I don't know what those problems are. But that is why we vote. If some Senator on the other side does not believe Bonnie Campbell is qualified or should not be a Federal judge in a circuit court, bring her name out, let's debate it. These are debatable positions. Let's talk about it. And then let's have the vote.

If someone feels they can't vote for her, that is their right and their obligation. But we did not even have that. We do not even have her name on the floor so we can debate it because the Judiciary Committee has bottled it up.

Then I was told her name came in too late. It came in just this year. I heard that again. That is also in the news reports today, that somehow this vacancy occurred a year ago, but her name did not come down until March.

So I did a little research.

In 1992, when President Bush—that is the father of Governor Bush—was President in 1992, and the Senate was in Democratic hands, we had 13, 14 judges nominated; 9 had hearings; 9 were referred; and 9 were confirmed—all in 1992. Every judge who had a hearing got referred, got acted on, and got confirmed.

Now, that was OK in 1992, I guess, when there was a Republican President and a Democratic Senate. But I guess it is not OK when we have a Democratic President and a Republican Senate.

Here we are. This chart shows this year, we have had seven nominees, including Bonnie Campbell. We have had two hearings; we have had one referred; one confirmed—one out of seven. So this kind of story I am hearing, that

her nomination came in too late, is just pure malarkey. This is just another smokescreen.

Circuit judges. They say: Well, it's a circuit court. There's an election coming up. We might win it, so we want to save that position so we can get one of our Republican friends in there.

Well, again, in 1992, circuit nominees, we had nine: six were acted on in July and August, two in September, and one in October. Yet in the year 2000, we had one acted on this summer, and we are in the closing days of October. No action.

So, again, it is not fair. It is not right. It is not becoming of the dignity and the constitutional role of the Senate to advise and consent on these judges.

Thirty-three women out of 148 circuit judges; 22 percent—I guess my friends on the other side think that is fine. I do not think it is fine.

Again, everything has been done. All of the paperwork has been in, and here she sits.

UNANIMOUS CONSENT REQUEST— NOMINATION OF BONNIE CAMP-BELL

Mr. HARKIN. Mr. President, I will now—and I will every day—ask unanimous consent to discharge the Judiciary Committee on further consideration of the nomination of Bonnie Campbell, the nominee for the Eighth Circuit Court, and that her nomination be considered by the Senate immediately following the conclusion of action on the pending matter, and that the debate on the nomination be limited to 2 hours, equally divided, and that a vote on her nomination occur immediately following the use or yielding back of that time.

The PRESIDING OFFICER. Is there objection?

Mr. FRIST. Mr. President, I object on behalf of the leader.

The PRESIDING OFFICER. Objection is heard.

Mr. HARKIN. I wish I knew why people are objecting. Why are they objecting to Bonnie Campbell? Why are they objecting to a debate on the Senate floor? Why are they objecting to bringing her name out so that we can have a discussion and a vote on it?

I want to make clear for the Record, it is not anyone other than the Republican majority holding up this nominee. Every day we are here—I know there will be an objection—I am going to ask unanimous consent because I want the Record to show clearly what is happening here and who is holding up this nominee who is fully qualified to be on the circuit court for the Eighth Circuit.

Now I want to turn my comments to something the Senator from Minnesota was talking about; that is, the prescription drug program from the debate last night. Quite frankly, I was pretty surprised to hear Governor Bush talking about his prescription drug program. He calls it an "immediate helping hand," and there is a TV ad being waged across the country to deceive and frighten seniors. He talks about "Mediscare"; that was Bush's comment last night. He accused the Vice President of engaging in "Mediscare," scaring the elderly.

If the Bush proposal for prescription drugs were to ever go into effect, seniors ought to be scared because what it would mean would be the unraveling of Medicare, letting Medicare wither on the vine.

Let's take a look at the Bush proposal. We know it is a two-stage proposal. First, it would be turned over to the States. It would require all 50 States to pass enabling or modifying legislation. Only 16 States have any kind of drug benefit for seniors. Each State would have a different approach.

The point is, many State legislatures don't meet but every 2 years. Even if we were to enact the program, there are some State legislatures that wouldn't get to it for a couple years.

Our most recent experience with something such as this is the CHIP program, the State Children's Health Insurance Program, which Congress passed in 1997. It took Governor Bush's home State of Texas over 2 years to implement the CHIP program. It is not immediate.

He calls it "immediate helping hand." It won't be immediate because States will have a hard time implementing it. In fact, the National Governors' Association says they don't want to do it. This is the National Governors' Association:

If Congress decides to expand prescription drug coverage to seniors, it should not shift that responsibility or its costs to the states.

That is exactly what Bush's 4-year program does. Beyond that, his plan only covers low-income seniors. Many of the seniors I have met and talked with wouldn't qualify for Bush's plan.

A recent analysis shows that the Bush plan would only cover 625,000 seniors, less than 5 percent of those who need help. His plan is not Medicare; it is welfare. What the seniors of this country want is Medicare, not welfare. Seniors would likely have to apply to a State welfare office. They would have to show what their income is. If they make over \$14,600 a year, they are out. They get nothing, zero.

After this 4-year State block grant, then what is his plan? Well, it gets worse. Then his long-term plan is tied to privatizing Medicare; again, something that would start the unraveling of Medicare. It would force seniors to join HMOs.

So under Governor Bush's program, after the 4-year State program, then we would go into a new program. It would be up to insurance companies to

take it. So seniors who need drug coverage would have to go to their HMO. They would not get a guaranteed package. The premium would be chosen by the HMO, the copayment chosen by the HMO, the deductible chosen by the HMO. And the drugs you get? Again, chosen by the HMO.

The PRESIDING OFFICER. The Senator's time has expired.

Mr. HARKIN. Mr. President, I ask unanimous consent for at least a couple more minutes to finish up. I didn't realize I was under a time schedule.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. HARKIN. Bush's plan would leave rural Americans out in the cold. Thirty percent of seniors live in areas with no HMOs. And contrary to what the Senator from Minnesota said, if I heard him correctly, under the Bush program, the Government would pay 25 percent of the premiums and Medicare recipients would have to pay 75 percent.

The Bush program basically is kind of scary. Seniors ought to be afraid of it, because if it comes into being, you will need more than your Medicare card. You will need your income tax returns to go down and show them how much income you have, how many assets you have. If you qualify, you are in; if you don't, you are out. That would be the end of Medicare.

I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. FRIST. Mr. President, I ask unanimous consent that I be given time as needed, yielded off the continuing resolution.

The PRESIDING OFFICER. Without objection, it is so ordered.

CHILDREN'S HEALTH ACT OF 2000

Mr. FRIST. Mr. President, I have come to the floor to discuss and share with my colleagues very good news, some news that is bipartisan, that reflects what is the very best of what the Senate is all about.

It has to do with a bill called the Children's Health Act of 2000, a bill that is bipartisan, that reflects the input of probably 20 to 30 individual Senators on issues that mean a great deal to them based on their experience, their legislative history, what they have done in the past, their personal experiences, and responding to their constituents. This bill passed the Senate last week and passed the House of Representatives last week and will be sent to the President of the United States sometime either later tonight or tomorrow.

The Children's Health Act of 2000, is a comprehensive bill, a bill that forms the backbone of efforts to improve the health and safety of young people today, of America's children today. But equally important, it gathers the investments to improve the health, the well-being of children of future generations.

It is fascinating to me because it was about a year or a year and a half ago that Senator Jeffords and I, after working on this particular piece of legislation for a couple of years, reached out directly across the Capitol to Chairman BLILEY and Representative BILIRAKIS to work together to address a whole variety of children's health issues, including day-care safety, maternal, child, and fetal health, pediatric public health promotion, pediatric research, efforts to fight drug abuse, and efforts to provide mental health services for our young people today.

The good news, with all of the other debates that are going on and the partisanship going back and forth, is that we in the Senate, as the Congress, we as a government have been successful in accomplishing this bipartisan, bicameral effort.

The bill that Congress now sends to the President includes two divisions or two parts. The first part, part A, addresses issues regarding children's health. The second part, part B, addresses youth drug abuse.

I would like to take a few moments to outline not the entire bill, but a number of the provisions in this bill, because I think it reflects the care and the thoughtfulness with which this bill was put together.

The first is day care safety. Perhaps the most critical section of the first part of this bill relates to day care health and safety. We based it on the bill which was called, the Children's Day Care Health and Safety Improvement Act, a bill that I introduced, again, in a bipartisan way, with Senator Dodd on March 9 of this year.

Currently, there are more than 13 million children under the age of 6 who, every day, are enrolled in day care. About a quarter of a million children in Tennessee go to day care. The day care safety bill recognizes that it is our responsibility as a society, as a Government, to make sure that these day care facilities are as safe as possible, such as the health of children in child care is protected, so that when a parent, or both parents, drop that child off at day care, they can rest assured that the child will be in a safe environment throughout the day.

The danger in child care settings recently has become evident in my own State of Tennessee, again drawing upon how we learn and listen in our own States and bring those issues together and discussing them on the floor of the Senate and then fashion them into a bill. Tragically, within the span of just two years, in one city in Tennessee, four children died in child care settings. In addition, one in five child care programs in another city in Tennessee were found to have potentially put the